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CONFIRMATION NO. 7384

<b>SERIAL NUMBER</b> 10/608,029	<b>FILING OR 371(c) DATE</b> 06/30/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1648	<b>ATTORNEY DOCKET NO.</b> 239783US0	
<b>APPLICANTS</b> Philippe Despres, La Garenne-Colombes, FRANCE; Adeline Cateau, Savigny-Sur-Orge, FRANCE; <i>MFS 09/17/06</i>					
<b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/06/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>MFS</i> Examiner's Signature <i>MFS</i> Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 7 <i>MFS</i>	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 22850 <i>09/17/06</i>					
<b>TITLE</b> ATTENUATED FLAVIVIRUS STRAINS CONTAINING A MUTATED M-ECTODOMAIN AND THEIR APPLICATIONS					
<b>FILING FEE RECEIVED</b> 1286	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		